# Test Scenario 05 Taxpayer: Lynette Heather SSN: 400-00-1035

# Test Scenario 05 includes the following forms:

- Form 1040
- Form 1099-R
- Schedule D
- Form 8949
- Schedule E
- Schedule F
- Schedule J
- Form 3800
- Form 4136
- Form 4835 (2)
- Form 6252
- Form 8826

Taxpayer Date of Birth = 10-29-1950

Schedule J Assume entries are correct for lines 5, 9, 13, 19, 20 and 21.

Form 4136 Only pages 1 and 4 are needed. Assume all gasoline purchased prior to September 30, 2011.

Form 8949
Part I line 1(b) and Part II line 3(b)
Code(s) currently unavailable.

<u> </u>	U.S.	Individual	Incom	е Тах	Return			OMB No	. 1545-0074	IRS Use O	nly—D	o not write or staple in this	space.
For the year Jan. 1-De	c. 31, 2011	I, or other tax year b	eginning			, 2011,	ending		, 20		Se	e separate instructio	ons.
Your first name and	initial		L	ast nam	е						You	ur social security num	nber
Lynette			Н	leather							4	0 0 0 0 1 0	3 5
If a joint return, spou	use's first	name and initial	L	ast nam	е						Spc	ouse's social security nu	ımber
Home address (num	ber and s	street). If you have	a P.O. box	, see inst	tructions.					Apt. no.	_	Make sure the SSN(s)	above
2525 Juniper Stre	eet											and on line 6c are co	orrect.
City, town or post office	ce, state, a	ind ZIP code. If you	have a foreig	n addres	s, also complete	spaces below (	(see inst	ructions).			Pı	residential Election Cam	npaign
Paul ID 83347												ck here if you, or your spouse	-
Foreign country nam	пе				Foreign pro	ovince/county	/		Foreign	postal code		y, want \$3 to go to this fund. x below will not change your t	
											refun		Spouse
Filing Status	1	Single					4	Head	of househol	d (with qual	ifying ı	person). (See instruction	ns.) If
rilling Status	2	Married filin	g jointly (e	ven if o	nly one had ir	ncome)						not your dependent, ent	
Check only one	3	Married filin	g separate	ly. Ente	er spouse's S	SN above		child'	s name here	. <b>&gt;</b>			
box.		and full nam	ne here. ►		•		5	Quali	ifying widov	w(er) with c	depen	dent child	
Exemptions	6a	✓ Yourself.	If someon	e can c	laim you as a	dependent,	, do no	t check	box 6a .		. 1	Boxes checked	
Exemplions	b	Spouse									. ∫	on 6a and 6b No. of children	_1_
	С	Dependents:			(2) Dependent	i's <b>(3</b>	B) Depend	dent's		d under age 1		on 6c who:	
	(1) First	name	Last name		social security nu	mber rela	ationship	to you		child tax cred age 15)	IIL	<ul><li>lived with you</li><li>did not live with</li></ul>	_
												you due to divorce or separation	
If more than four												(see instructions)	
dependents, see instructions and												Dependents on 6c not entered above	
check here ▶												Add numbers on	
	d	Total number	of exempt	ions cla	imed							lines above	
Income	7	Wages, salari	es, tips, et	c. Attac	h Form(s) W-	2					7		
	8a	Taxable inter	est. Attach	Sched	ule B if requir	ed					8a	368	
=	b	Tax-exempt i	interest. D	o not in	clude on line	8a	. 8b						
Attach Form(s) W-2 here. Also	9a	Ordinary divid	lends. Atta	ch Sch	edule B if req	uired	4			<i>A</i>	9a		
attach Forms	b	Qualified divid	dends .				. 9b						
W-2G and	10	Taxable refun	ds, credits	, or offs	sets of state a	ind local inc	ome ta	axes .		[	10		
1099-R if tax was withheld.	11	Alimony recei	ved			•		3.6	.4		11		
was withheld.	12	Business inco	me or (los	s). Atta	ch Schedule (	C or C-EZ .					12		
If you did not	13	Capital gain o	r (loss). At	tach Sc	hedule D if re	quired. If no	ot requ	ired, che	ck here		13		
If you did not get a W-2,	14	Other gains o	r (losses). A	Attach F	Form 4797 .						14		
see page 20.	15a	IRA distribution	ons .	15a			b Ta	axable an	nount .		15b		
	16a	Pensions and		16a		86484	_	axable an			16b		
Enclose, but do	17	Rental real es									17		
not attach, any	18	Farm income									18		
payment. Also,	19	Unemployme								Г	19		
please use	20a	Social security							nount .		20b		
Form 1040-V.	21	Other income				7 16	L 01 TI		. 4 - 4 - 1 !		21		-
	22	Combine the ar							total incor	ne 🚩	22		
Adjusted	23	Educator exp					23			+			
Gross	24	Certain busines	•		• •	•	1						
Income	05	fee-basis gover					24			+			
	25	Health saving								+			
	26	Moving exper								+			
	27	Deductible part		•						+			
	28	Self-employed								+			
	29	Self-employed								+			
	30 31a	Penalty on ea					30 31a			+			
	31a 32	Alimony paid IRA deduction								+			
	33	Student loan i								+			
	34	Tuition and fe								+			
	35	Domestic prod					35			+			
	36	Add lines 23 t						_			36		
	37	Subtract line 3									37		+

Form 1040 (2011	)			Version A	4, Cycle 4 Page <b>2</b>
	38	Amount from line 37 (adjusted gross income)	38		1 age 2
Tax and	39a	Check \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Credits		if: ☐ Spouse was born before January 2, 1947, ☐ Blind. ☐ checked ▶ 39a			
Standard	b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b	ן ונ		
Deduction for—	40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40		
People who	41	Subtract line 40 from line 38	41		
check any box on line	42	Exemptions. Multiply \$3,700 by the number on line 6d	42		
39a or 39b <b>or</b> who can be	43	<b>Taxable income.</b> Subtract line 42 from line 41. If line 42 is more than line 41, enter -0	43		
claimed as a	44	Tax (see instructions). Check if any from: a ☐ Form(s) 8814 b ☐ Form 4972 c ☐ 962 election	44		
dependent, see	45	Alternative minimum tax (see instructions). Attach Form 6251	45		
instructions.  • All others:	46	Add lines 44 and 45	46		
Single or	47	Foreign tax credit. Attach Form 1116 if required 47			
Married filing separately,	48	Credit for child and dependent care expenses. Attach Form 2441			
\$5,800	49	Education credits from Form 8863, line 23	_		
Married filing jointly or	50	Retirement savings contributions credit. Attach Form 8880 50	_		
Qualifying widow(er),	51	Child tax credit (see instructions)	_		
\$11,600	52	Residential energy credits. Attach Form 5695 52	$\dashv$		
Head of household,	53	Other credits from Form: a 3800 b 8801 c 53			
\$8,500	54 55	Add lines 47 through 53. These are your <b>total credits</b>	54		+
			55		
Other	56 57	Self-employment tax. Attach Schedule SE	56 57		_
Taxes	5 <i>1</i>	Unreported social security and Medicare tax from Form: <b>a</b> 4137 <b>b</b> 8919 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58		+
	59a	Household employment taxes from Schedule H	59a		+
	b	First-time homebuyer credit repayment. Attach Form 5405 if required	59a		+
	60		60		+
	61	Other taxes. List code(s) from instructions  Add lines 55 through 60. This is your <b>total tax</b>	61		+
Payments	62	Federal income tax withheld from Forms W-2 and 1099 62	0.		_
T dyments	63	2011 estimated tax payments and amount applied from 2010 return 63			
If you have a	64a	Earned income credit (EIC) 64a			
qualifying child, attach	b	Nontaxable combat pay election 64b			
Schedule EIC.	65	Additional child tax credit. Attach Form 8812 65			
	66	American opportunity credit from Form 8863, line 14 66			
	67	First-time homebuyer credit from Form 5405, line 10 67			
	68	Amount paid with request for extension to file 68			
	69	Excess social security and tier 1 RRTA tax withheld 69			
	70	Credit for federal tax on fuels. Attach Form 4136			
	71	Credits from Form: <b>a</b> 2439 <b>b</b> 8839 <b>c</b> 8801 <b>d</b> 8885 <b>71</b>			
	72	Add lines 62, 63, 64a, and 65 through 71. These are your <b>total payments</b>	72		
Refund	73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you <b>overpaid</b>	73		
	74a	Amount of line 73 you want <b>refunded to you.</b> If Form 8888 is attached, check here	74a		
Direct deposit?	► b	Routing number			
See instructions.	► d	Account number			
	75	Amount of line 73 you want applied to your 2012 estimated tax ▶ 75			
Amount You Owe	76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions	76		
100 Owe	77	Estimated tax penalty (see instructions)		-lata balana -	7 N.
Third Party	Do	· —		olete below.	No
Designee		signee's Phone Personal identi	ification		$\Box$
Sign		me ► no. ► number (PIN)  der penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to	the hest (	of my knowledge and	helief
Here		y are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which prep			Dellel,
Joint return?	You	ur signature Date Your occupation	Daytim	ne phone number	
See page 12.					
Keep a copy for your	Spe	ouse's signature. If a joint return, <b>both</b> must sign.  Date  Spouse's occupation			
records.	,				
Paid	Pri	nt/Type preparer's name Preparer's signature Date	Chack	PTIN	
				mployed	
Preparer Use Only	Firr	m's name ► Firm's EIN ►		<u> </u>	
USE OILLY	Firr	m's address ▶ Phone no.			

Version A, Cycle 5 Image Dimensions: 7.3" x 5.1"

		CIE	<b>Ξ</b> D				
PAYER'S name, street address,	city, state, and ZIP code	1	Gross distribution	OM	IB No. 1545-0119		Distributions From
Primrose Retirement Fund				ĺ		P	ensions, Annuities,
1231 Juniper Street		\$	36484	4	2011		Retirement or Profit-Sharing
Paul ID 83347		2a	Taxable amount	4			Plans, IRAs,
							Insurance
		\$	24760	F	orm <b>1099-R</b>		Contracts, etc.
		2b	Taxable amount		Total		Copy 1
			not determined		distribution	n 🗌	For
PAYER'S federal identification	RECIPIENT'S identification	3	Capital gain (included	4	Federal income t	tax	State, City,
number	number		in box 2a)		withheld		or Local
_							Tax Department
69-0000009	400-00-1035	\$		\$		4839	
RECIPIENT'S name	<del>JBAL</del>	5	Employee contributions	6	Net unrealized		
_			/Designated Roth contributions or		appreciation in employer's sec		
Lynette Heather			insurance premiums		ciripioyei 3 3cc	unics	
_		\$		\$			
Street address (including apt. no		7	Distribution IRA/	8	Other		
2525 Juniper Street	muan		code(s) SEP/ SIMPLE				
2525 Juniper Street	11101011	1	7	\$		%	
City, state, and ZIP code		9a	Your percentage of total	9b	Total employee cont	ributions	
Paul ID 83347			distribution %	\$			
10 Amount allocable to IRR	11 1st year of desig. Roth contrib.	12	State tax withheld	13	State/Payer's st	ate no.	14 State distribution
within 5 years		\$		Ì			\$
\$		\$		ļ			\$
Account number (see instructions)		15	Local tax withheld	16	Name of locality	у	17 Local distribution
		\$					\$
		\$					\$

Form 1099-R

Department of the Treasury - Internal Revenue Service

# SCHEDULE D (Form 1040)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Lynette T Heather

# **Capital Gains and Losses**

OMB No. 1545-0074

20**11** 

Attachment Sequence No. **12** 

400-00-1035

► Attach to Form 1040 or Form 1040NR. ► See Instructions for Schedule D (Form 1040). ► Use Form 8949 to list your transactions for lines 1, 2, 3, 8, 9, and 10.

► Use Form 8949 to list your transactions for lines 1, 2, 3, 8, 9, and 10.

Sequence No. 1

Your social security number

Pa	rt I Short-Term Capital Gains and Losses – As	sets Held One \	Year or Less			
Not	te: Please round and use whole dollars on this form.	(e) Sales price from Form(s) 8949, line 2, column (e)	(f) Cost or other basis from Form(s) 8949, line 2, column (f)	(g) Adjustme gain or loss Form(s) 89 line 2, colum	from 49,	(h) Gain or (loss) Combine columns (e), (f), and (g)
1	Short-term totals from all Forms 8949 with box A checked in Part I		( )			
2	Short-term totals from all Forms 8949 with box B checked in Part I		( )			
3	Short-term totals from all Forms 8949 with box C checked in Part I		( )			
	Short-term gain from Form 6252 and short-term gain or (IN Net short-term gain or (loss) from partnerships, Schedule(s) K-1	S corporations,	estates, and tr	usts from	4 5	
6	Short-term capital loss carryover. Enter the amount, if ar <b>Worksheet</b> in the instructions	•	-	-	6	( )
7	Net short-term capital gain or (loss). Combine lines 1 t	through 6 in colum	ın (h)		7	
Pa	t II Long-Term Capital Gains and Losses—Ass	sets Held More	Than One Year			
lot	e: Please round and use whole dollars on this form.	(e) Sales price from Form(s) 8949, line 4, column (e)	(f) Cost or other basis from Form(s) 8949, line 4, column (f)	(g) Adjustme gain or loss Form(s) 89 line 4, colum	from 49,	(h) Gain or (loss) Combine columns (e), (f), and (g)
8	Long-term totals from all Forms 8949 with box A checked in Part II	15	004)	4		
9	Long-term totals from all Forms 8949 with box B checked in Part II	0, 4				
10	Long-term totals from all Forms 8949 with box C checked in Part II		( )			
11	Gain from Form 4797, Part I; long-term gain from Forms from Forms 4684, 6781, and 8824			, ,	11	
12	Net long-term gain or (loss) from partnerships, S corporate	tions, estates, and	trusts from Sched	lule(s) K-1	12	
	Capital gain distributions. See the instructions				13	
14	Long-term capital loss carryover. Enter the amount, if any <b>Worksheet</b> in the instructions	•	•	-	14	( )
15	<b>Net long-term capital gain or (loss).</b> Combine lines 8 t the back	•	``		15	
or	Paperwork Reduction Act Notice, see your tax return instruction		Cat. No. 1133		Schedu	ıle D (Form 1040) 2011

Schedule D (Form 1040) 2011 Page **2** 

Part	Summary. Note: Please round and use whole dollars on this form.		
16	Combine lines 7 and 15 and enter the result	16	
	• If line 16 is a <b>gain</b> , enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.		
	• If line 16 is a <b>loss</b> , skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.		
	• If line 16 is <b>zero</b> , skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.		
17	Are lines 15 and 16 <b>both</b> gains?  ✓ <b>Yes.</b> Go to line 18.		
	No. Skip lines 18 through 21, and go to line 22.		
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions ▶	18	0
19	Enter the amount, if any, from line 18 of the <b>Unrecaptured Section 1250 Gain Worksheet</b> in the instructions	19	0
20	Are lines 18 and 19 both zero or blank?  ✓ Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below.  ✓ No. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Schedule P Tax Worksheet in the jectrosticae Points applied lines 21 and 22 below.		
21	Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.  If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of:  • The loss on line 16 or • (\$3,000), or if married filing separately, (\$1,500)	21	)
	Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b?		
	<ul> <li>Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42).</li> <li>No. Complete the rest of Form 1040 or Form 1040NR.</li> </ul>		

# **Sales and Other Dispositions of Capital Assets**

► See Instructions for Schedule D (Form 1040).

ch to Schedule D to list your transactions for lines 1, 2, 3, 8, 9, and 10.

Attachment Seguence N

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

Name(s) shown on return

2011 Attachment Sequence No. 12A

OMB No. 1545-0074

Lynette T Heather

Your social security number 400-00-1035

Part I Short-Term Capital Gains and Losses—Assets Held One Year or Less Note. Please round and use whole dollars on this form. Check the box below that describes the transactions listed on this page. Caution. Check only one box. If you have more than one type of transaction, complete a separate Form 8949 for each type. (A) Short-term gains and losses ☐ **(B)** Short-term gains and losses (Form ☐ (C) Short-term gains and losses (Form 1099-B, box 3, shows basis) 1099-B, box 3, does not show basis) (Form 1099-B not received) (a) Description of property (Example: 100 sh. XYZ Co.) (c) Date acquired (d) Date sold (f) Cost or other basis (e) Sales price (g) Adjustments to (Mo., day, yr.) (see instructions) (see instructions) (Mo., day, yr.) gain or loss 100 sh AVR Co 3-1-2011 9-9-2011 1429 0 2515 100 sh BKX Co 1102 2-8-2011 7-11-2011 3236 0 100 sh QLM Co 5-5-2011 11-9-2011 1344 1546 0 Totals. Add the amounts in columns (e) and (f). Also, combine the amounts in column (g). Enter here and include on Schedule D, line 1 (if box A above is checked), line 2 (if box B above is checked), or 2 line 3 (if box C above is checked) .

Form 8949 (2011) Attachment Sequence No. **12A** Page **2** 

Name(s) shown on return. Do not enter name and social security number if shown on other side.

Your social security number

Lynette T Heather 400-00-1035

Part II Long-Term Capital Gain						
Note. Please round and use whole dolla						
Check the box below that describes the					00401	
Caution. Check only one box. If you have				·		
(A) Long-term gains and losses (Form 1099-B, box 3, shows basis)		Long-term gains 99-B, box 3, does			ong-term gains an n 1099-B not recei	
(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Code	(c) Date acquired (Mo., day, yr.)	(d) Date sold (Mo., day, yr.)	(e) Sales price (see instructions)	(f) Cost or other basis (see instructions)	(g) Adjustments to gain or loss
100 sh MNP Co		6-1-2009	5-5-2011	4244	807	0
100 sh DNQ Co		2-15-2009	9-10-2011	349	1782	0
Di	3/		A	50		
				104		
A	or		5, 2	207		
4 Totals. Add the amounts in colu amounts in column (g). Enter here	and inclu	ide on Schedule	D, line 8			
(if box A above is checked), line 9 10 (if box C above is checked) .						

Page 2 Your social security number Name(s) shown on return. Do not enter name and social security number if shown on other side. 400-00-1035 Lynette T Heather Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1. Part II Income or Loss From Partnerships and S Corporations Note. If you report a loss from an at-risk activity for which any amount is not at risk, you must check the box in column (e) on line 28 and attach Form 6198. See instructions. 27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year ☐ No Yes unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed  $\square$ partnership expenses? If you answered "Yes," see instructions before completing this section. (c) Check if (b) Enter P for (d) Employer (e) Check if 28 (a) Name partnership; S foreign identification any amount is not at risk for S corporation partnership number Α В C D Passive Income and Loss Nonpassive Income and Loss (i) Section 179 expense (f) Passive loss allowed (a) Passive income (h) Nonpassive loss (j) Nonpassive income (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 deduction from Form 4562 from Schedule K-1 Α В C D 29a **Totals** Totals b Add columns (g) and (j) of line 29a. 30 31 Add columns (f), (h), and (i) of line 29b 31 32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below 32 Part III Income or Loss From Estates and Trusts (b) Employer 33 (a) Name identification number Α В Passive Income and Loss Nonpassive Income and Loss (c) Passive deduction or loss allowed (d) Passive income (e) Deduction or loss (f) Other income from (attach Form 8582 if required) from Schedule K-1 from Schedule K-1 Schedule K-1 Α В 34a Totals Totals h Add columns (d) and (f) of line 34a. 35 35 36 Add columns (c) and (e) of line 34b 36 37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below 37 Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder Part IV (c) Excess inclusion from (b) Employer identification (d) Taxable income (net loss) (e) Income from 38 (a) Name Schedules Q, line 2c (see instructions) 39 Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below 39 Part V Summary Net farm rental income or (loss) from Form 4835. Also, complete line 42 below . 40 40 41 Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18 ▶ 41 Reconciliation of farming and fishing income. Enter your gross 42 farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), line 14, code F (see instructions) . . . 42 Reconciliation for real estate professionals. If you were a real estate 43 professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules.

#### SCHEDULE J (Form 1040)

**Income Averaging for Farmers and Fishermen** 

► Attach to Form 1040 or Form 1040NR.
 ► See separate Instructions.

OMB No. 1545-0074

2011 Attachment Sequence No. 20

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Social security number (SSN)

•	) shown on return TTE T HEATHER	Social secu	rity number (SSN) 400-00-1035
1	Enter the taxable income from your <b>2011</b> Form 1040, line 43, or Form 1040NR, line 41	. 1	28220
<b>2</b> a	Enter your <b>elected farm income</b> (see instructions). <b>Do not</b> enter more than the amount on line	1 <b>2</b> a	9405
	Capital gain included on line 2a:		
b	Excess, if any, of net long-term capital gain over net short-term capital loss		
С	Unrecaptured section 1250 gain		
3	Subtract line 2a from line 1	3	18815
4	Figure the tax on the amount on line 3 using the 2011 tax rates (see instructions)	. 4	1949
5	If you used Schedule J to figure your tax for:  • 2010, enter the amount from your 2010 Schedule J, line 11.  • 2009 but not 2010, enter the amount from your 2009 Schedule J, line 15.  • 2008 but not 2009 or 2010, enter the amount from your 2008 Schedule J, line 3.  Otherwise, enter the taxable income from your 2008 Form 1040, line 43; Form 1040A, line 27; Form 1040EZ, line 6; Form 1040NR, line 40; or Form 1040NR-EZ, line 14. If zero or less, see instructions.	-	
6	Divide the amount on <b>line 2a</b> by 3.0		
7	Combine lines 5 and 6. If zero or less, enter -0		
8	Figure the tax on the amount on line 7 using the <b>2008</b> tax rates (see instructions)	. 8	3625
9	If you used Schedule J to figure your tax for:  • 2010, enter the amount from your 2010 Schedule J, line 15.  • 2009 but not 2010, enter the amount from your 2009 Schedule J, line 3.  Otherwise, enter the taxable income from your 2009 Form 1040, line 43; Form 1040A, line 27; Form 1040EZ, line 6; Form 1040NR, line 40; or Form 1040NR-EZ, line 14. If zero or less, see instructions.		
0	Enter the amount from line 6		
1	Combine lines 9 and 10. If less than zero, enter as a negative amount 17391		
2	Figure the tax on the amount on line 11 using the <b>2009</b> tax rates (see instructions)	. 12	2191
13	If you used Schedule J to figure your tax for 2010, enter the amount from your 2010 Schedule J, line 3. Otherwise, enter the taxable income from your 2010 Form 1040, line 43; Form 1040A, line 27; Form 1040EZ, line 6; Form 1040NR, line 41; or Form 1040NR-EZ, line 14. If zero or less, see instructions		
4	Enter the amount from line 6		
5	Combine lines 13 and 14. If less than zero, enter as a negative amount 22845		
6	Figure the tax on the amount on line 15 using the <b>2010</b> tax rates (see instructions)	. 16	3008
17	Add lines 4, 8, 12, and 16	. 17	10773

Page 2

Schedule J (Form 1040) 2011

18	Amount from line 17	18	10773	
	74 HOUR HOITH HOUTE		10770	
19	If you used Schedule J to figure your tax for:  • 2010, enter the amount from your 2010 Schedule J, line 12.  • 2009 but not 2010, enter the amount from your 2009 Schedule J, line 16.  • 2008 but not 2009 or 2010, enter the amount from your 2008 Schedule J, line 4.			
	Otherwise, enter the tax from your <b>2008</b> Form 1040, line 44;* Form 1040A, line 28;* Form 1040EZ, line 11; Form 1040NR, line 41;* or Form 1040NR-EZ, line 15.			
20	If you used Schedule J to figure your tax for:  • 2010, enter the amount from your 2010 Schedule J, line 16.  • 2009 but not 2010, enter the amount from your 2009 Schedule J, line 4.  Otherwise, enter the tax from your 2009 Form 1040, line 44;* Form 1040A, line 28;* Form 1040EZ, line 11; Form 1040NR, line 41;* or Form 1040NR-EZ, line 15.			
21	If you used Schedule J to figure your tax for 2010, enter the amount from your 2010 Schedule J, line 4. Otherwise, enter the tax from your 2010 Form 1040, line 44;* Form 1040A, line 28;* Form 1040EZ, line 11; Form 1040NR, line 42;* or Form 1040NR-EZ, line 15			
22	Add lines 19 through 21	22	7968	
23	Tax. Subtract line 22 from line 18. Also include this amount on Form 1040, line 44; or Form 1040NR, line 42	23	2805	
Qualifi	<b>on.</b> Your tax may be less if you figure it using the 2011 Tax Table, Tax Computation Worksheet, led Dividends and Capital Gain Tax Worksheet, or Schedule D Tax Worksheet. Attach Schedule J you are using it to figure your tax.			

Schedule J (Form 1040) 2011

# **SCHEDULE F** (Form 1040)

# **Profit or Loss From Farming**

OMB No. 1545-0074

Sequence No. 14

Department of the Treasury Internal Revenue Service (99) ► Attach to Form 1040, Form 1040NR, Form 1041, Form 1065, or Form 1065-B. ► See Instructions for Schedule F (Form 1040).

Attachment

Lynette T Heather  A Principal crop or activity  B Enter code from Part IV Floral Plants  C Accounting method:  ▶ 1 1 1 1 4 0 0	D Emp	400-00-1035 loyer ID number (EIN), if any
Tiordinants	1 1 !	
		ses. V Yes No
E Did you "materially participate" in the operation of this business during 2011? If "No," see instructions for limit on		
F Did you make any payments in 2011 that would require you to file Form(s) 1099 (see page F-3 of the instructions)		
G If "Yes," did you or will you file all required Forms 1099?	II and III <i>i</i>	
1a Specified sales of livestock and other resale items (see page F-3) 1a 2536	ii aiiu iii, a	
b Sales of livestock and other resale items not reported on line 1a		
c Total		
d Cost or other basis of livestock or other items reported on line 1c 1d 0		
e Subtract line 1d from line 1c	. 1e	
2a Specified sales of products you raised (see page F-3)	. 2a	
<b>b</b> Sales of products you raised not reported on line 2a	. 2b	
3a Cooperative distributions (Form(s) 1099-PATR) . 3a 3b Taxable amou	nt <b>3b</b>	
4a Agricultural program payments (see page F-3) . 4a 4b Taxable amou	nt <b>4b</b>	
5a Commodity Credit Corporation (CCC) loans reported under election	. 5a	
b CCC loans forfeited	nt <b>5c</b>	
6 Crop insurance proceeds and federal crop disaster payments (see page F-3):		
a Amount received in 2011 6a 6b Taxable amou	nt <b>6b</b>	
c If election to defer to 2012 is attached, check here ▶ ☐ 6d Amount deferred from 2010	) 6d	
7a Specified custom hire (machine work) income (see page F-3)		
<b>b</b> Custom hire income not reported on line 7a		
8a Specified other income (see page F-3)		
<b>b</b> Other income not reported on line 8a (see page F-3)		
9 Gross income. Add amounts in the right column (lines 1e, 2a, 2b, 3b, 4b, 5a, 5c, 6b, 6d, 7a, 7b, 8a, a	II.	
8b). If you use the accrual method, enter the amount from Part III, line 50	<u>▶ 9</u>	
		e r-4).
10Car and truck expenses (see instructions). Also attach Form 45621023Pension and profit-sharing plan24Rent or lease (see instructions).		
11 Chemicals		
12 Conservation expenses (see instructions) 12 b Other (land, animals, etc.)		
13 Custom hire (machine work) . 13 25 Repairs and maintenance .		
14 Depreciation and section 179 26 Seeds and plants		
expense (see page F-5) 14 27 Storage and warehousing .		
15 Employee benefit programs 28 Supplies	. 28	994
other than on line 23 <b>15 29</b> Taxes	. 29	166
16 Feed	. 30	143
17 Fertilizers and lime 17 626 31 Veterinary, breeding, and medicing	ne <b>31</b>	
18 Freight and trucking 18 32 Other expenses (specify):		
19 Gasoline, fuel, and oil 19 227 a		
20 Insurance (other than health) 20 101 b		
21 Interest: c		
a Mortgage (paid to banks, etc.) 21a d		
b Other	32e 32f	
<ul> <li>Total expenses. Add lines 10 through 32f. If line 32f is negative, see instructions</li></ul>		
Net farm profit or (loss). Subtract line 33 from line 9	. 34	
35 Did you receive a subsidy in 2011? (see page F-7)		🗌 Yes 🔲 No
36 Check the box that describes your investment in this activity and see page F-7 for where to report your loss		100110
a ☐ All investment is at risk. b ☐ Some investment is not at risk.		

**General Business Credit** 

▶ See separate instructions.▶ Attach to your tax return.

OMB No. 1545-0895

20 1 1

Attachment
Sequence No. 22

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Identifying number

Lynette T Heather

Part I

Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT)

(See instructions and complete Part(s) III before Parts I and II)

ı art	(See instructions and complete Part(s) III before Parts I and II)			
1	General business credit from line 2 of all Parts III with box A checked	1		
2	Passive activity credits from line 2 of all Parts III with box B checked 2 0			
3	Enter the passive activity credits allowed from line 2 for 2011 (see instructions)	3	0	
4	Carryforward of general business credit to 2011. Enter the amount from line 2 of all Parts III			
	with box C checked. See instructions for schedule to attach	4	0	
5	Carryback of general business credit from 2012. Enter the amount from line 2 of all Parts III			
	with box D checked (see instructions)	5	0	
6	Add lines 1, 3, 4, and 5	6		
Part	Allowable Credit			
7	Regular tax before credits:			
	<ul> <li>Individuals. Enter the amount from Form 1040, line 44, or Form 1040NR, line 42</li> </ul>			
	Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the			
	applicable line of your return	7		
	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G,			
	lines 1a and 1b; or the amount from the applicable line of your return			
8	Alternative minimum tax:			
	• Individuals. Enter the amount from Form 6251, line 35			
	• Corporations. Enter the amount from Form 4626, line 14	8	0	
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56			
_				
9	Add lines 7 and 8	9		
10-	Foreign to constit			
	Foreign tax credit	-		
	The state of the s	10c		
С	Add lines 10a and 10b	100		
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16a	11		
• •	The mount was outside into 100 normino of 11 2010, only into 12 through 10 three of our into 100	•••		
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-   12			
13	Enter 25% (.25) of the excess, if any, of line 12 over \$25,000			
	(see instructions)			
14	Tentative minimum tax:			
	• Individuals. Enter the amount from Form 6251, line 33			
	• Corporations. Enter the amount from Form 4626, line 12 }			
	Estates and trusts. Enter the amount from Schedule I			
	(Form 1041), line 54			
15	Enter the greater of line 13 or line 14	15		
	Subtract line 15 from line 11. If zero or less, enter -0	16a		
b	For a corporation electing to accelerate the research credit, enter the bonus depreciation			
	amount attributable to the research credit (see instructions)	16b		
С	Add lines 16a and 16b	16c		
4-	5	_		
17a	Enter the <b>smaller</b> of line 6 or line 16c	17a		
	C corporations: See the line 17a instructions if there has been an ownership change,			
I-	acquisition, or reorganization.			
b	Enter the smaller of line 6 or line 16a. If you made an entry on line 16b, go to line 17c; otherwise,	4-7-		
_	skip line 17c (see instructions)	17b		
С	Subtract line 17b from line 17a. This is the refundable amount for a corporation electing to accelerate the research credit. Include this amount on Form 1120. Schedule J. Part II. line 19c			

17c

Form 3800 (2011) Page **2** 

Part	II Allowable Credit (Continued)		
Note.	If you are not filing Form 8844, skip lines 18 through 25 and enter -0- on line 26.		
18	Multiply line 14 by 75% (.75) (see instructions)	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11. If zero or less, enter -0	20	
21	Subtract line 17b from line 20. If zero or less, enter -0	21	
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	
23	Passive activity credit from line 3 of all Parts III with box B checked 23		
24	Enter the passive activity credit allowed from line 23 for 2011 (see instructions)	24	
25	Add lines 22 and 24	25	
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	
27	Subtract line 13 from line 11. If zero or less, enter -0	27	
28	Add lines 17b and 26	28	
29	Subtract line 28 from line 27. If zero or less, enter -0	29	
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	
31 32	Enter the total eligible small business credit from line 6 of all Parts III with box E checked Passive activity credits from line 5 of all Parts III with box B checked and line 6 of all Parts III with box F checked	31	
33	Enter the passive activity credits allowed from line 32 for 2011 (see instructions)	33	
34	Carryforward of business credit to 2011. Enter the amount from line 5 of all Parts III with box C checked and line 6 of all Parts III with box G checked	34	
35	Carryback of business credit from 2012. Enter the amount from line 5 of all Parts III with box D checked and line 6 of all Parts III with box H checked	35	
36	Add lines 30, 31, 33, 34, and 35	36	
37	Enter the <b>smaller</b> of line 29 or line 36	37	
38	Credit allowed for the current year. Add lines 28 and 37.  Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return:		
	<ul> <li>Individuals. Form 1040, line 53, or Form 1040NR, line 50</li></ul>	38	

Fo	rm 3800	(2011)				Page 3
P	art III	General Business Credits or Eligible Small Business Credits (see	e inst	ructions)		
Co	omple	e a separate Part III for each box checked below. (see instructions)				
Α	V (	General Business Credit From a Non-Passive Activity E   Eligible Small	Busin	ess Credit From a	Non-Passive Act	ivity
В		General Business Credit From a Passive Activity F 🔲 Eligible Small	Busin	ess Credit From a	Passive Activity	-
С		General Business Credit Carryforwards G Eligible Small	Busin	ess Credit Carryfo	rwards	
D		General Business Credit Carrybacks H				
ı		u are filing more than one Part III with box A, B, E, or F checked, complete an		•		ining
		unts from all Parts III with box A, B, E, or F checked. Check here if this is the co				
_		(a) Description of credit		(b)	(c)	
No	ote: O	n any line where the credit is from more than one source and one of the sources	sisa	If claiming the credit	Enter the approp	oriate
		ough entity, a separate Part III is needed for each pass-through entity.	, 10 u	from a pass-through entity, enter the EIN	amount	
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	,,		
	b	Reserved for future use	1b			
	C	Increasing research activities (Form 6765)	1c			
	d	Low-income housing (Form 8586, Part I only)	1d			+
	e	Disabled access (Form 8826) (do not enter more than \$5,000 in column (c) of	٠.٩			+
		Parts III with box A, B, E, or F checked, combined)	1e			
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f			+
	g	Indian employment (Form 8845)	1g			1
	9 h	Orphan drug (Form 8820)	1h			1
	i	New markets (Form 8874)	1i			+
	i	Small employer pension plan startup costs (Form 8881) (do not enter more than				+
	,	\$500 in column (c) of Parts III with box A, B, E, or F checked, combined)	1j			
	k	Employer-provided child care facilities and services (Form 8882)	1k			+
	ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11			+
	n m	Low sulfur diesel fuel production (Form 8896)	1m			+
	n	Distilled spirits (Form 8906)	1n			+
	0	Nonconventional source fuel (Form 8907)	10			+
	р	Energy efficient home (Form 8908)	1p			+
	q	Energy efficient appliance (Form 8909)	1q			+
	ч r	Alternative motor vehicle (Form 8910)	1r			+
	s	Alternative fuel vehicle refueling property (Form 8911)	1s			+
	t	Reserved for future use	1t			
	u	Mine rescue team training (Form 8923)	1u			
	v	Agricultural chemicals security (Form 8931) (do not enter more than \$2 million in	- iu			+
	-	column (c) of Parts III with box A, B, E, or F checked, combined)	1v			
	w	Employer differential wage payments (Form 8932)	1w			
	x	Carbon dioxide sequestration (Form 8933)	1x			+
	у	Qualified plug-in electric drive motor vehicle (Form 8936)	1y			+
	z	Qualified plug-in electric vehicle (Form 8834, Part I only)	1z			
	aa	New hire retention (Form 5884-B)	1aa			
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb			
	ZZ	Other	1zz			
	2	Add lines 1a through 1zz and enter here	2			
	3	Enter the amount from Form 8844	3			
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a			
	b	Work opportunity (Form 5884)	4b			
	С	Alcohol and cellulosic biofuel fuels (Form 6478)	4c			
	d	Low-income housing (Form 8586, Part II)	4d			
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e			
	f	Employer social security and Medicare taxes paid on certain employee tips				
		(Form 8846)	4f			
	g	Qualified railroad track maintenance (Form 8900)	4g			
	h	Small employer health insurance premiums (Form 8941)	4h			
	i	Reserved for future use	4i			
	j	Reserved for future use	4j			
	Z	Other	4z			1
	5	Add lines 4a through 4z and enter here	5			1
	6	Add lines 2.3, and 5	6			1

## **Credit for Federal Tax Paid on Fuels**

OMB No. 1545-0162

Department of the Treasury Internal Revenue Service (99) ► See the separate instructions.

► Attach this form to your income tax return.

Attachment Sequence No. 23

Name (as shown on your income tax return)

Taxpayer identification number

Lynette T Heather

400-00-1035

Caution. Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 and 14), 3d, 4c, and 5, claimant has not waived the right to make the claim. For claims on lines 1c and 2b (type of use 13 and 14), claimant certifies that a certificate has not been provided to the credit card issuer.

1	Nontaxable Use of Gasoline Note. CRN is credit reference number.								
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN			
а	Off-highway business use		\$ .183	)					
b	Use on a farm for farming purposes		.183	229		362			
С	Other nontaxable use (see <b>Caution</b> above line 1)		.183		\$				
d	Exported		.184			411			

#### 2 Nontaxable Use of Aviation Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$ .15*		\$	354
b	Other nontaxable use (see <b>Caution</b> above line 1)		.193*			324
С	Exported		.194*			412
d	LUST tax on aviation fuels used in foreign trade		.001			433
	*See instructions for possible rate changes.					

#### 3 Nontaxable Use of Undyed Diesel Fuel

Claimant certifies that the diesel fuel did not contain visible evidence of dye. Exception. If any of the diesel fuel included in this claim did contain visible evidence of dye, attach an explanation and check here ▶ (e) CRN (a) Type of use (b) Rate (c) Gallons (d) Amount of credit Nontaxable use \$.243 Use on a farm for farming purposes .243 360 Use in trains .243 353 Use in certain intercity and local buses (see Caution above line 1) .17 350 Exported .244 413

#### 4 Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)

	Claimant certifies that the kerosene did not contain visible evidence of dye.  Exception. If any of the kerosene included in this claim did contain visible evidence of dye, attach an explanation and check here ▶							
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN		
а	Nontaxable use taxed at \$.244		\$ .243	l				
b	Use on a farm for farming purposes		.243		\$	346		
С	Use in certain intercity and local buses (see <b>Caution</b> above line 1)		.17			347		
d	Exported		.244			414		
е	Nontaxable use taxed at \$.044		.043			377		
f	Nontaxable use taxed at \$.219		.218			369		

Page 4

Form 4136 (2011)

## 13 Registered Credit Card Issuers

## Registration No. ▶

		(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Diesel fuel sold for the exclusive use of a state or local government	\$ .243		\$		360
b	Kerosene sold for the exclusive use of a state or local government	.243				346
С	Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at \$.219*	.218*				369

\*See instructions for possible rate changes.

#### 14 Nontaxable Use of a Diesel-Water Fuel Emulsion

	Caution. There is a reduced credit rate for use in certain intercity and local buses (type of use 5) (see instructions).							
(a) Type of use (b) Rate (c) Gallons					(d) Amount of cre	edit	(e) CRN	
а	Nontaxable use		\$ .197		\$		309	
b	Exported		.198				306	

## 15 Diesel-Water Fuel Emulsion Blending

#### Registration No. ▶

				(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
Blender credit		$\Lambda$		\$ .046		\$	310

# 16 Exported Dyed Fuels and Exported Gasoline Blendstocks

2011

		(b) Rate	(c) Gallons	(d) Amount of cre	edit	(e) CRN
а	Exported dyed diesel fuel and exported gasoline blendstocks taxed at \$.001	\$ .001		\$		415
b	Exported dyed kerosene	.001				416

17	Total income tax credit claimed. Add lines 1 through 16, column (d). Enter here and on Form			
	1040, line 69; Form 1120, line 32f(2); Form 1120S, line 23c; Form 1041, line 24g; or the proper			
	line of other returns. ▶	17	\$	

Form **4136** (2011)

Department of the Treasury Internal Revenue Service (99)

# **Farm Rental Income and Expenses**

(Crop and Livestock Shares (Not Cash) Received by Landowner (or Sub-Lessor))
(Income not subject to self-employment tax)

► Attach to Form 1040 or Form 1040NR.

► See instructions on page 3.

OMB No. 1545-0074

2011

Attachment
Sequence No. 37

Name(s) shown on tax return Your social security number 400-00-1035 Lynette T Heather Employer ID number (EIN), if any Did you actively participate in the operation of this farm during 2011 (see instructions)? . . . . . . Α Yes Part I Gross Farm Rental Income - Based on Production. Include amounts converted to cash or the equivalent. 1 Income from production of livestock, produce, grains, and other crops. 4531 Cooperative distributions (Form(s) 1099-PATR) 0 2b Taxable amount 2b 2a 2a 3b Taxable amount 3a Agricultural program payments (see instructions) 3b Commodity Credit Corporation (CCC) loans (see instructions): CCC loans reported under election 4a 0 а 4c Taxable amount 4b CCC loans forfeited . . . 4c b 5 Crop insurance proceeds and federal crop disaster payments (see instructions): Amount received in 2011 . . . . . . . . . . . . . 5a **5b** Taxable amount 5b If election to defer to 2012 is attached, check here ▶ □ 5d Amount deferred from 2010 5d 0 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) 0 Gross farm rental income. Add amounts in the right column for lines 1 through 6. Enter the 7 total here and on Schedule E (Form 1040), line 41. . . . . . 7 Part II Expenses - Farm Rental Property. Do not include personal or living expenses. Pension and profit-Car and truck expenses (see sharing plans . . . Schedule F (Form 1040) 21 instructions). Also attach Form 4562 8 22 Rent or lease: Vehicles, machinery, and 9 Chemicals. . . . . . 9 10 Conservation expenses (see equipment (see instructions) . . . . . instructions). . . . 10 22a 11 Custom hire (machine work) . 11 Other (land, animals, etc.) 22b 23 12 Depreciation and section 179 23 Repairs and maintenance expense deduction not 24 Seeds and plants . . 24 claimed elsewhere . . . 12 25 Storage and warehousing 25 Employee benefit programs other 26 13 Supplies . . . . . 26 than on line 21 (see Schedule F 27 27 Taxes . . . . . 510 (Form 1040) instructions). . . Utilities . . . . . 13 28 29 14 Veterinary, breeding, 14 Feed . . . . . . . and medicine . . . 15 Fertilizers and lime . . . 15 30 Other expenses 16 16 Freight and trucking . (specify): 17 17 Gasoline, fuel, and oil . . . 266 30a 18 Insurance (other than health). 18 255 а 19 Interest: 30b ----а Mortgage (paid to banks, etc.) 19a 1043 30c C \_\_\_\_\_ 19b 30d Other . . . . . . . . b Labor hired (less employment 20 30e credits) (see Schedule F (Form 30f 1040) instructions) . . . . 20 30g 31 31 32 Net farm rental income or (loss). Subtract line 31 from line 7. If the result is income, enter it here and on Schedule E (Form 1040), line 39. If the result is a loss, you must go to lines 33 and 34. 32 33 33 ☐ Yes ☐ No 34 If line 32 is a loss, check the box that describes your investment in this activity **34a** All investment is at risk. (see instructions) **34b** Some investment is not at risk. You may have to complete Form 8582 to determine your deductible loss, regardless of which box you checked (see instructions). If you checked box 34b, you must complete Form 6198 before going to Form 8582. In either case, enter the deductible loss here and on Schedule E

(Form 1040), line 39

34c

Department of the Treasury Internal Revenue Service (99)

# **Farm Rental Income and Expenses**

(Crop and Livestock Shares (Not Cash) Received by Landowner (or Sub-Lessor))
(Income not subject to self-employment tax)

► Attach to Form 1040 or Form 1040NR.

► See instructions on page 3.

OMB No. 1545-0074

2011

Attachment
Sequence No. 37

Name(s) shown on tax return Your social security number 400-00-1035 Lynette T Heather Employer ID number (EIN), if any Did you actively participate in the operation of this farm during 2011 (see instructions)? . . . . . . Α Yes Part I Gross Farm Rental Income - Based on Production. Include amounts converted to cash or the equivalent. 1 Income from production of livestock, produce, grains, and other crops. 5452 Cooperative distributions (Form(s) 1099-PATR) 0 2b Taxable amount 2b 2a 2a 3b Taxable amount 3a Agricultural program payments (see instructions) 3b Commodity Credit Corporation (CCC) loans (see instructions): CCC loans reported under election 4a 0 а 4c Taxable amount 4b CCC loans forfeited . . . 4c b 5 Crop insurance proceeds and federal crop disaster payments (see instructions): Amount received in 2011 . . . . . . . . . . . . . 5a **5b** Taxable amount 5b If election to defer to 2012 is attached, check here ▶ □ 5d Amount deferred from 2010 5d 6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions) 0 Gross farm rental income. Add amounts in the right column for lines 1 through 6. Enter the 7 total here and on Schedule E (Form 1040), line 41. . . . . . 7 Part II Expenses - Farm Rental Property. Do not include personal or living expenses. Pension and profit-Car and truck expenses (see sharing plans . . . Schedule F (Form 1040) 21 instructions). Also attach Form 4562 8 22 Rent or lease: Vehicles, machinery, and 9 Chemicals. . . . . . 9 10 Conservation expenses (see equipment (see instructions) . . . . . instructions). . . . 10 22a 11 Custom hire (machine work) . 11 Other (land, animals, etc.) 22b 23 12 Depreciation and section 179 23 Repairs and maintenance expense deduction not 24 Seeds and plants . . 24 claimed elsewhere . . . 12 25 Storage and warehousing 25 Employee benefit programs other 26 13 Supplies . . . . . 26 than on line 21 (see Schedule F 27 27 Taxes . . . . . 218 (Form 1040) instructions). . . Utilities . . . . . 13 28 29 14 Veterinary, breeding, 14 Feed . . . . . . . and medicine . . . 15 Fertilizers and lime . . . 15 30 Other expenses 16 16 Freight and trucking . (specify): 17 17 317 Gasoline, fuel, and oil . . . 120 30a 18 Insurance (other than health). 18 а 19 Interest: 30b ----а Mortgage (paid to banks, etc.) 19a 963 30c C \_\_\_\_\_ 19b 30d Other . . . . . . . . b Labor hired (less employment 20 30e credits) (see Schedule F (Form 30f 1040) instructions) . . . . 20 30g 31 31 32 Net farm rental income or (loss). Subtract line 31 from line 7. If the result is income, enter it here and on Schedule E (Form 1040), line 39. If the result is a loss, you must go to lines 33 and 34. 32 33 33 ☐ Yes ☐ No 34 If line 32 is a loss, check the box that describes your investment in this activity **34a** All investment is at risk. (see instructions) **34b** Some investment is not at risk. You may have to complete Form 8582 to determine your deductible loss, regardless of which box you checked (see instructions). If you checked box 34b, you must complete Form 6198 before going to Form 8582. In either case, enter the deductible loss here and on Schedule E

(Form 1040), line 39

34c

**Installment Sale Income** 

Identifying number

Department of the Treasury Internal Revenue Service Name(s) shown on return

► Attach to your tax return. ► Use a separate form for each sale or other disposition of property on the installment method.

2011 Attachment Sequence No. **79** 

OMB No. 1545-0228

Lynet	e T Heather		400-00-1035
1	Description of property ► land		
2a	Date acquired (mm/dd/yyyy) ► 10/01/1998 b Date sold (mm/dd/yyyy) ► 1	0/01/200	)4
3	Was the property sold to a related party (see instructions) after May 14, 1980? If "No," skip line 4.		. Yes 🗹 No
4	Was the property you sold to a related party a marketable security? If "Yes," complete Part III. If "No		
	complete Part III for the year of sale and the 2 years after the year of sale		Yes 🗌 No
Part	Gross Profit and Contract Price. Complete this part for the year of sale only.		
5	Selling price including mortgages and other debts. <b>Do not</b> include interest, whether stated or unstated	5	
6	Mortgages, debts, and other liabilities the buyer assumed or took the		
	property subject to (see instructions) 6		
7	Subtract line 6 from line 5		
8	Cost or other basis of property sold		
9	Depreciation allowed or allowable		
10	Adjusted basis. Subtract line 9 from line 8		
11	Commissions and other expenses of sale		
12	Income recapture from Form 4797, Part III (see instructions) 12		
13	Add lines 10, 11, and 12	13	
14	Subtract line 13 from line 5. If zero or less, <b>do not</b> complete the rest of this form (see instructions)	14	
15	If the property described on line 1 above was your main home, enter the amount of your excluded		
	gain (see instructions). Otherwise, enter -0	15	
16	Gross profit. Subtract line 15 from line 14	16	
17	Subtract line 13 from line 6. If zero or less, enter -0	17	
18	Contract price. Add line 7 and line 17	18	
Part			a payment or have
	certain debts you must treat as a payment on installment obligations.		
19	Gross profit percentage (expressed as a decimal amount). Divide line 16 by line 18. For years after		
	the year of sale, see instructions	19	40.00
20	If this is the year of sale, enter the amount from line 17. Otherwise, enter -0	20	0
21	Payments received during year (see instructions). <b>Do not</b> include interest, whether stated or unstated	21	2500
22	Add lines 20 and 21	22	
23	Payments received in prior years (see instructions). <b>Do not</b> include		
	interest, whether stated or unstated		
24	Installment sale income. Multiply line 22 by line 19	24	_
25	Enter the part of line 24 that is ordinary income under the recapture rules (see instructions)	25	0
26	Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797 (see instructions)	26	1 41-1- 1
Part		aymen	it this tax year.
27	Name, address, and taxpayer identifying number of related party		
00	Did the valeted party weell as dispersed the group at ("accorded line siting") during this towns and		
28 29	Did the related party resell or dispose of the property ("second disposition") during this tax year? . If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following conditions is r		
	The second disposition was more than 2 years after the first disposition (other than disposition).		ck the box that applies.
а	marketable securities). If this box is checked, enter the date of disposition (mm/dd/yyyy)		
b	The first disposition was a sale or exchange of stock to the issuing corporation.		
C	The second disposition was an involuntary conversion and the threat of conversion occurred aft	or the fi	ret dienocition
d	The second disposition occurred after the death of the original seller or buyer.	er trie ii	ist disposition.
e	It can be established to the satisfaction of the IRS that tax avoidance was not a principal	Lourne	ose for either of the
-	dispositions. If this box is checked, attach an explanation (see instructions).	. Puipe	ioi oitiloi oi tile
30	Selling price of property sold by related party (see instructions)	30	
31	Enter contract price from line 18 for year of first sale	31	
32	Enter the <b>smaller</b> of line 30 or line 31	32	
33	Total payments received by the end of your 2011 tax year (see instructions)	33	
34	Subtract line 33 from line 32. If zero or less, enter -0	34	
35	Multiply line 34 by the gross profit percentage on line 19 for year of first sale	35	
36	Enter the part of line 35 that is ordinary income under the recapture rules (see instructions)	36	
37	Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797 (see instructions)	37	

(Rev. December 2006) Department of the Treasury Internal Revenue Service

Name(s) shown on return

#### **Disabled Access Credit**

► Attach to your tax return.

OMB No. 1545-1205

Attachment

Sequence No. 86

Identifying number

**Lynette T Heather** 400-00-1035 488 Total eligible access expenditures (see instructions) 250 00 2 Minimum amount Subtract line 2 from line 1. If zero or less, enter -0-3 3 4 \$10,000 00 4 Maximum amount 5 Enter the smaller of line 3 or line 4 6 Multiply line 5 by 50% (.50) 7 0 Disabled access credit from partnerships and S corporations Add lines 6 and 7, but do not enter more than \$5,000. Partnerships and S corporations, report this amount on Schedule K; all others, report this amount on the applicable line of Form 3800 (e.g., line 

# **General Instructions**

Section references are to the Internal Revenue Code.

#### What's New

- The tax liability limit is no longer figured on this form; instead, it must be figured on Form 3800, General Business Credit.
- Taxpayers that are not partnerships or S corporations, and whose only source of this credit is from those pass-through entities, are not required to complete or file this form. Instead, they can report this credit directly on line 1g of Form 3800.
- The IRS will revise this December 2006 version of the form only when necessary. Continue to use this version for tax vears beginning after 2005 until a new revision is issued.

#### Purpose of Form

Eligible small businesses use Form 8826 to claim the disabled access credit. This credit is part of the general business credit.

#### **Definitions**

#### **Eligible Small Business**

For purposes of the credit, an eligible small business is any business or person that:

 Had gross receipts for the preceding tax year that did not

exceed \$1 million or had no more than 30 full-time employees during the preceding tax year and

• Elects (by filing Form 8826) to claim the disabled access credit for the tax year.

For purposes of the definition:

- Gross receipts are reduced by returns and allowances made during the tax year,
- An employee is considered full time if employed at least 30 hours per week for 20 or more calendar weeks in the tax year, and
- All members of the same controlled group and all persons under common control generally are considered to be one person-see section 44(d)(2).

#### **Eligible Access Expenditures**

For purposes of the credit, these expenditures are amounts paid or incurred by the eligible small business to comply with applicable requirements under the Americans With Disabilities Act of 1990 (Public Law 101-336) as in effect on November 5, 1990.

Eligible access expenditures include amounts paid or incurred:

1. To remove barriers that prevent a business from being accessible to or usable by individuals with disabilities:

- 2. To provide qualified interpreters or other methods of making audio materials available to hearing-impaired individuals;
- 3. To provide qualified readers, taped texts, and other methods of making visual materials available to individuals with visual impairments;
- 4. To acquire or modify equipment or devices for individuals with disabilities.

The expenditures must be reasonable and necessary to accomplish the above purposes.

Eligible expenditures do not include expenditures in 1 above that are paid or incurred in connection with any facility first placed in service after November 5, 1990.

Eligible access expenditures must meet those standards issued by the Secretary of the Treasury as agreed to by the Architectural and Transportation Barriers Compliance Board and set forth in regulations. See section 44(c) for other details.

Disability. For an individual, this means:

- A physical or mental impairment that substantially limits one or more major life activities,
- A record of such an impairment, or
- Being regarded as having such an impairment.